

27  
2402  
103-883

ISSUE SLIP STAPLE AREA (for additional references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		10-22-01
O.I.P.E. CLASSIFIER	Jha	946	12/05/01
FORMALITY REVIEW	BZ M.D.	883	12-21-02

Response

INDEX OF CLAIMS

03-28-02

✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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